



The American Preparedness Project: Where the US Public Stands in 2007 on Terrorism, Security, and Disaster Preparedness

**Annual Survey of the American Public by the
National Center for Disaster Preparedness,
Columbia University Mailman School of Public Health
and The Children's Health Fund**

**Survey administered by the Marist College Institute for Public
Opinion**

Direct all correspondence to:

National Center for Disaster Preparedness
Columbia University, Mailman School of Public Health
722 West 168th Street, 10th Floor
New York, NY 10032
(212) 305-0338

Authors

Irwin Redlener, M.D.

Director, National Center for Disaster Preparedness
Associate Dean, Mailman School of Public Health
President, The Children's Health Fund

David Abramson, Ph.D., M.P.H.

Director of Research, National Center for Disaster Preparedness

Tasha Stehling-Ariza, M.P.H.

Research Associate, National Center for Disaster Preparedness

Roy Grant, M.A.

Director of Research, The Children's Health Fund

Dennis Johnson, M.P.A.

Director of Policy and Public Affairs, Mailman School of Public Health
Executive Vice President for Policy, The Children's Health Fund

Introduction

Since 2002, the National Center for Disaster Preparedness (NCDP) at Columbia University's Mailman School of Public Health and The Children's Health Fund (CHF), have conducted annual surveys of public attitudes and personal preparedness in the aftermath of the terror attacks of September 11, 2001. Produced in collaboration with the Marist College Institute for Public Opinion (MIPO), each is a random-dial telephone survey of a representative random sample of the US population (selected consistent with demographic characteristics of the most recent available update of the 2000 census).

Each survey, including the current, has included a set of questions repeated every year, which generate trend data, as well as questions specific to events current to each study period. Repeated questions ask about confidence in government; willingness and ability to evacuate; extent of personal and family preparedness; and perceptions of community preparedness. All questions are compared across a variety of demographic characteristics including race, age, gender, income, and region, size of community, political affiliation, and education. Further, the responses to select questions, such as awareness of community preparedness plans, are compared across certain groups of respondents (e.g. those having personal and family preparedness plans vs. those who do not). The surveys are developed by NCDP and CHF investigators in conjunction with MIPO, who administers the survey, codes the data, and produces the frequency tables.

Full data and trend tables are available on request.

Executive Summary

In order to properly plan for disaster situations, it is vital for policymakers and emergency responders to understand the attitudes, concerns, and reactions of individuals and families caught in a disaster. Additionally, this information can guide the development of disaster preparedness educational materials or programs for the general public.

In July 2007, the sixth annual survey of the American Preparedness Project, conducted by the National Center for Disaster Preparedness (NCDP) and The Children's Health Fund (CHF), in partnership with the Marist College Institute for Public Opinion, revealed a continuing large gap between individuals' perceived risk and their level of personal preparedness for a disaster. Nearly half of the adults in the nation expect that they will experience a major disaster such as a terror attack or a weather catastrophe, during the next several years, and two-thirds of Americans believe that the Iraq War and unrest in the Middle East increase the threat of terrorism. However, most Americans are relying on "just in time" preparedness -- waiting until they receive warning of a looming disaster before finishing preparations to evacuate or shelter in place. This "preparedness gap" is greatest among Americans with the lowest household income.

Confidence in the government to provide accurate and reliable information, as well as its ability to protect its citizens, remains low despite modest improvement after four consecutive years of general decline. Trust is greater for local responders, with more than a third (37%) believing that if there were a major disaster, help would arrive within an hour.

In terms of risk communication, the Centers for Disease Control and Prevention (CDC) continues to be the most trusted source for reliable and accurate information about a public health emergency, and the most persuasive when deciding to prepare for a public health emergency, after a personal doctor. The president continues to be the least trusted information source.

Key Findings

The Gap Between Perceived Threat and Personal Preparedness

Nearly six years after the terror attacks on September 11, 2001 and two years after the devastating effects of Hurricanes Katrina and Rita, most Americans believe the threat of disaster, natural or man-made, is high. However, few are prepared for a major disaster.

- **Four out of five (80%) Americans are concerned about new terror attacks in the United States.**
- **Most Americans (66%) believe the United States' involvement in the war in Iraq and other Middle East conflicts increase the threat of an act of terrorism occurring within the United States.**
- **Nearly half the people in the country (47%) believe they will personally experience a major disaster such as a terror attack or a catastrophic weather emergency within the next five years.**
- **Despite the high perceived threat, only one-third (34%) of Americans have started preparing or are prepared for a major disaster:** 24% of Americans this year have been prepared for at least six months; an additional 10% are just beginning to prepare. **Strikingly, 43% are not planning to do anything about preparing.**
- **It seems as though many residents are relying upon “just-in-time” preparedness – 60% of Americans said that given sufficient warning of an impending disaster they would still need to get or organize most or all of those items they would require to either shelter in their home or evacuate.**
- **When asked about specific types of major disasters, 43% of Americans said they personally feel very prepared or prepared for a disaster with *no* warning (terror attack or earthquake).** The least prepared include those who earn less than \$25,000

annual household income (32% prepared vs. 49% among household earners with greater than \$75,000); Latinos (33% prepared vs. whites, 44%); and women (36% vs. 50% of men who report being prepared). Democrats are less likely than Republicans to be prepared (38% vs. 55%).

- **More Americans (60%) personally feel very prepared or prepared for a disaster *with* warning (hurricane or wildfire).** Similar to disasters with no warnings, the least prepared include those who earned less than \$25,000 annual household income (47% prepared vs. 65% among household earners with greater than \$75,000); Latinos (48% prepared vs. whites, 65%); and women (55% vs. 65% of men who report being prepared). Again, Democrats are less likely than Republicans to be prepared (59% vs. 66%), though to a lesser degree.
- The proportion of Americans with a family emergency preparedness plan has leveled off, having risen modestly from 35% in 2003 to 45% in 2005, and staying within the margin of error at 43% currently in 2007.
- Over half (54%) of US residents believe their community has an adequate response plan for a major disaster *with* warning, such as a hurricane, flood, or wildfire, whereas only 40% believe their community is as prepared for a disaster with *no* warning, such as a terrorist attack or earthquake.
- When asked if a tax credit or other financial incentive would affect their decision to prepare, only 28% of Americans polled said they would be more likely to become prepared. Most likely to be influenced include younger respondents (under 35 years old, 37%) and African-American respondents (37%).

Low income fosters a “preparedness gap” among Americans

As described above, there is a disconnect between Americans’ relatively high perceived risk of experiencing a disaster and their low level of personal preparedness. This increases among households with the lowest incomes. Understanding the attitudes of the least prepared Americans may help explain some of this gap.

- **Greater fatalism and dependency:** Americans with annual household incomes below \$25,000 are more likely than those with incomes above \$50,000 to believe that **luck is more important than preparation** in order survive a disaster (43% vs. 33%) and more likely to believe that **it’s not really possible for the average person to prepare for a major disaster** (42% vs. 31%). They are also **more likely to wait for help in the event of a disaster** rather than take an active role (25% vs. 6%).
- **Lower sense of self-efficacy:** Americans with annual household incomes below \$25,000 **feel less confident** that they can deal with unexpected events (79% vs. 93%), or that they can usually handle whatever comes their way (89% vs. 96%), when compared to those with incomes above \$50,000.
- **Less training or disaster experience:** A surprisingly large number of Americans report having received training in CPR or first aid (71%), ever served in some capacity as military or public safety personnel (23%), or had personally experienced a disaster (36%). This may play an important role in the willingness and ability of an individual to take appropriate action before, during, and after a disaster as a learned skill. Americans with annual household incomes below \$25,000 are less likely to have experienced each of the above when compared to households with incomes greater than \$75,000: 57% vs. 81% trained in CPR or First Aid; 17% vs. 25% with uniformed or public safety service experience; and 27% vs. 44% experiencing a disaster situation.

Threat Perception

The potential disasters Americans perceive to be the greatest threats to their communities vary by geographic location.

- When rating their risk of six major threats happening to them or their communities, **Americans rank major emergency weather events – such as hurricanes, tornadoes, floods, or coastal storms – highest** (5.4 on a ten-point scale). Explosion of a nuclear device is lowest (2.8).
- These personal risk ratings generally vary by region: Southerners are far more likely to report a risk of a major weather event (6.3) than Westerners, but Westerners are more likely to report threat of wildfire (5.4) or a major geological event, such as earthquake or mudslide (5.3). Easterners are more likely to report a threat of a nuclear explosion (3.4) than are residents of the Central US (2.5).

Confidence and Trust in Government

- **Americans trust the CDC to give them accurate and reliable information (84%)**, and that doesn't vary much by race, gender, region, or politics (nor has it varied much over the years). **In contrast, only 63% of Americans polled trust FEMA to provide reliable and accurate information**, less than a mayor (75%) or the sheriff or police commissioner (82%).
- **The least trusted source of information is the president** at 49%, with more Americans trusting a TV medical correspondent (71%) to give them reliable information. Confidence in President Bush has declined steadily, from 65% in 2003 to 49% in 2007. By comparison, confidence in the CDC ranged from 82 – 84% over the same time period.
- **Most Americans would be persuaded to prepare for a public health emergency if instructed to do so by the CDC (86%) or their regular doctor (87%).** Other less

influential sources include the sheriff or police commissioner (83%), the mayor (78%), FEMA (75%), and a TV medical correspondent (69%).

- **Over one-third of Americans believe that in the event of a catastrophic disaster, help would arrive to assist them within the hour (37%).** Some Americans are even more optimistic regarding the speed of first response during a disaster: 55% of African-Americans, 51% of Latinos, and 45% of big city residents believe help will arrive within the first hour after a disaster. Overall, two-thirds of the country believes that help will arrive within several hours of the disaster.
- **Confidence in government and in health care systems is increasing, although it remains lower than four years ago.** The multi-year decline in confidence in the government to protect Americans from terrorist attacks, from a high of 62% in 2003 to a low of 42% in 2005, is improving, up to 54% (2007). The same can be said for confidence in the health care system to respond to biological, chemical, or nuclear attack: after having declined from 53% in 2002 to 28% in 2006, it is now up to 36% (2007).

Methods

The **2007 national survey** was conducted between July 9 and July 20, with 1,352 adults 18 years of age or older within the continental United States having been interviewed by telephone. Telephone numbers were selected based upon a complete list of telephone exchanges from throughout the nation. The exchanges were selected to ensure that each region in the country was represented in proportion to its population. The results of the survey are statistically significant at $\pm 2.7\%$. The margin of error increases for cross-tabulations. Interviews were conducted in both English and Spanish.

Previous years' surveys employed similar methodology and sample sizes.

Institutional Information

National Center for Disaster Preparedness

NCDP is an academically based, inter-disciplinary center focused on the nation's capacity to prevent and respond to terrorism and major disasters. NCDP's areas of expertise include disaster preparedness and response, mental health treatment, pediatric issues, and the socio-political dimensions of terrorism. NCDP is a national and international leader in disaster and terrorism readiness providing direct services to individuals affected by September 11, public health training, and applied research. NCDP produces curriculum on bioterrorism, develops mental health programs, provides training for public health professionals and other first responders, develops model programs, and has a wide-ranging research and public policy agenda. NCDP has collaborative relationships with faculty from Columbia University's schools of nursing, medicine, dentistry, journalism, Teacher's College, School of International and Public Affairs (SIPA), and Union Theological Center as well with scholars at leading national and international universities, centers, and across all levels of city, state, and federal government

Mailman School of Public Health

The only accredited school of public health in New York City, and among the first in the nation, Columbia University's Mailman School of Public Health provides instruction and research opportunities to more than 950 graduate students in pursuit of masters and doctoral degrees. Its students and more than 300 multi-disciplinary faculty engage in research and service in the city, nation, and around the world, concentrating on biostatistics, environmental health sciences, epidemiology, health policy and management, population and family health, and sociomedical sciences.

The Children's Health Fund

Founded by pediatrician/child advocate Irwin Redlener, MD, and singer/songwriter Paul Simon, CHF launched its first program in 1987 with a state-of-the-art mobile medical unit that brought medical care directly to homeless children in family shelters. CHF has since replicated the mobile medical model across the country and now consists of 21 rural and urban pediatric programs in 13 states and Washington DC. (www.childrenshealthfund.org).

CHF is committed to providing health care to the nation's most medically underserved children and their families through the development and support of innovative primary care medical programs, response to public health crises, and the promotion of guaranteed access to appropriate health care for all children.

Marist College Institute for Public Opinion

Founded in 1978, the Marist Institute for Public Opinion (MIPO) is a survey research center at Marist College in Poughkeepsie, New York. The Marist Poll has conducted independent research on public priorities, elections, and a wide variety of issues including the economy, health care, foreign affairs, the environment, science, information technology, and lifestyles. Through the regular public release of Marist Poll surveys, MIPO has built a reputation of independence, reliability, and accuracy. Frequently cited by journalists, public officials, and policy experts, the Marist Poll has been recognized for fairness, accuracy, and timeliness. Its results are featured in print and electronic media throughout the world including The New York Times, The Washington Post, USA Today, The Wall Street Journal, and on radio and television news broadcasts. MIPO offers full service commissioned research for business, government, and nonprofits in all phases including study design, sample methodology, questionnaire construction, data collection, data analysis, report writing, and presentation. In all matters, MIPO, as a research organization, adheres to the current Code of the National Council on Public Polls and the Standards and Ethics of the Council of American Research Organizations (CASRO). MIPO also provides educational opportunities for students and is a public resource for information on survey methodology through internships, conferences, seminars, and coursework.